

58

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIMS ONLY						SERIAL NO.	FILING DATE	
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP
	IND	DEP	IND	DEP	IND	DEP		
101		1					51	
2		1					52	
3		1					53	
104	1						54	
5		1					55	
6		1					56	
7		1					57	
8		1					58	
9		1					59	
10		1					60	
11		1					61	
12	1						62	
13		1					63	
14		1					64	
15		1					65	
16		1					66	
17		1					67	
18		1					68	
19		1					69	
20	1						70	
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41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	89						TOTAL IND.	
TOTAL DEP.	21	↔	↔	↔			TOTAL DEP.	
TOTAL CLAIMS	108	████████	████████	████████			TOTAL CLAIMS	████████